

SECRET
(When Filled In)

PERSONALITY (201) FILE REQUEST

NOTE: Consult the 201 Control System Reference Manual before completing this form. Form must be typed or printed in block letters.

TO: RID/201 Section		DATE 22 MAY 59	ACTION		
FROM: EE/G/L []		ROOM NO. 2211 2	TELEPHONE 528		

SECTION I

<input type="checkbox"/> SENSITIVE	[]	SOURCE DOCUMENT ECMA 12171
<input checked="" type="checkbox"/> NON-SENSITIVE	[]	E 34-5 E
NAME (Last) DEPPNER	(First) WILHELM	(Middle)
NAME VARIANT		

2. TYPE NAME	(Last)	(First)	(Middle)	(Title)
A	DIETRICH	EGON		
A	BORCHERT	ERNST		

4. PHOTO	5. BIRTH DATE	6. COUNTRY OF BIRTH	7. CITY OR TOWN OF BIRTH	CITIZENSHIP West Germany
YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	DAY <input type="checkbox"/> MONTH <input type="checkbox"/> YEAR <input type="checkbox"/> 70	GERMANY	EE/G/L
OTHER IDENTIFICATION				8. OTHER IDEN CODE 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/>
OCCUPATION/POSITION STAFF MEMBER, WGR INTEL SERVICE				9. OCC/POS CODE IF SR

SECTION II

CRYPTONYM	PSEUDONYM

SECTION III

10. COUNTRY OF RESIDENCE WGR	11. PRIMARY DESK INTEREST EE/G/L	12. 2ND COUNTRY INTEREST	12A. 3RD COUNTRY INTEREST
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COMMENTS

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCES/METHOD/EXEMPTION 3828
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006

PERMANENT CHARGE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	RESTRICTED FILE <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE
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